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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 283-392.12
Application Number 10/669,894		Filed: September 23, 2003
For: (NEW TITLE) Symbol Generator For Generating Programming Bar Code Symbols		
Art Unit 2876		Examiner Uyen Chau N Le

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$_____
<input type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$450	\$225	\$_____
<input checked="" type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1020	\$510	<u>\$1,020.00</u>
<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1590	\$795	\$_____
<input type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$_____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 50-0289. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 37,283

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

May 2, 2006	
Date	Signature
315-425-9000	George S. Blasiak
Telephone Number	Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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